

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)
Friends of Bill Posey

A. Full Name (Last, First, Middle Initial)
Bob E. Barrett

Mailing Address 1194 Winding Meadows Road

City State Zip Code
Rockledge FL 32955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
n/a retired

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 29 | | 2015 |

Transaction ID : C-66-00Md0B

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
Jeffrey M. Borysiewicz

Mailing Address 5737 Emerson Pointe Way

City State Zip Code
Orlando FL 32819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Corona Cigar Company cigar retailer

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | | 19 | | 2015 |

Transaction ID : C-87-00XN09

Amount of Each Receipt this Period

2600.00

C. Full Name (Last, First, Middle Initial)
George B. Browning

Mailing Address 8552 Sylvan Drive

City State Zip Code
Melbourne FL 32904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
self-employed pharmacist

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 12 | | 2015 |

Transaction ID : C-99-00RA0E

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

| |
|---------|
| 3700.00 |
|---------|